APPLICATION FOR FISH TRANSPORTATION PERMIT

FEIN or Social Security Number (REQUIRED)	
Name of Applicant		
Last	First	Middle Initial
Mailing Address	City, State, Zip	Phone Number
Check the reason you are applyir	ng for a transportation permit and f	ill out the appropriate section below
Live Bait, Live Fish, or Ot Transport through & Transport into KY fi Transport within KY Transport from KY	KY only rom another state	Roe-Bearing Fish and Roe
ection I - Live Bait, Live Fish,	or Other Aquatic Organisms	
ist the species you wish to trans	port:	
ppropriate section(s) below. Atta	ach additional sheets if necessary.	positive state into or through Kentucky complete the
appropriate section(s) below. Atta	ach additional sheets if necessary. om a Certified VHS Free Facility.	Also attach copy of certificates for each facility.
ppropriate section(s) below. Atta Origin if fish is fro	ach additional sheets if necessary. om a Certified VHS Free Facility.	Also attach copy of certificates for each facility.
ppropriate section(s) below. Atta Origin if fish is fro Facility No	ach additional sheets if necessary. om a Certified VHS Free Facility.	Also attach copy of certificates for each facility.
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ppropriate section(s) below. Atta Origin if fish is fro Facility No. a. Origin of VHS reg	ach additional sheets if necessary. om a Certified VHS Free Facility. A	Also attach copy of certificates for each facility. Address
ppropriate section(s) below. Atta Origin if fish is fro Facility No. a Origin of VHS rec	gulated fish species is from a non-	Also attach copy of certificates for each facility. Address certified VHS Free Facility. Also attach a copy of the
Prigin of VHS regards APHIS VS 1-27 F	ach additional sheets if necessary. Om a Certified VHS Free Facility. A ame gulated fish species is from a non- Permit for each shipment.	Also attach copy of certificates for each facility. Address certified VHS Free Facility. Also attach a copy of the
appropriate section(s) below. Atta Origin if fish is fro Facility No. a. Origin of VHS rec APHIS VS 1-27 F Origin Origin a.	ach additional sheets if necessary. Om a Certified VHS Free Facility. A ame gulated fish species is from a non- Permit for each shipment.	Also attach copy of certificates for each facility. Address certified VHS Free Facility. Also attach a copy of the

	All other shipments that are not listed in above shall not be unloaded in Kentucky but may pass through. Give origin, destination, and species for each shipment.				
	Species	Ori	gin	Destination	
a.					
b.					
C.					
	oe-Bearing Fish and	d Roe or Roe Fish if Different fro	om Listed Above		
Last		First		Middle Initial	
Mailing Addres	ss	City, State, Zip		Phone Number	
Signature of C	ommercial Fisherma	n			
Commercial Fi	ishing License Numb	er			
Roe-Bearing F	rish and Roe Permit	Number			
KAR 1:125 are that I, as perm	e binding upon me. I	further realize that this per any provision of the permit	mit can be revok	requirements listed on the permit and in 30 ed without refund if the Commissioner finds (AR 1:125 or other applicable Department	
Signature of A	pplicant		Date		
This application	should be completed in	n full with the \$25.00 fee to:	Kentucky Departi #1 Sportsman's L Frankfort, Kentuc 800-858-1549		